

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>05 - 31 - '05</u>		2 Serial/Patent # <u>10 / 529, 624</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
<div style="border: 1px solid black; padding: 2px; background-color: #f0f0f0;">           Claim for the Small Entity            filed within two month         </div>		7 TOTAL AMOUNT OF REFUND		\$							
10 REASON:		8 TO BE REFUNDED BY: <u>\$615.00</u>									
<input checked="" type="checkbox"/> Overpayment <input type="checkbox"/> Duplicate Payment <input type="checkbox"/> No Fee Due (Explanation):		Treasury Check  Credit Deposit A/C #: 9 <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">0</td> <td style="width: 20px;">8</td> <td style="width: 20px;">--</td> <td style="width: 20px;">1</td> <td style="width: 20px;">6</td> <td style="width: 20px;">4</td> <td style="width: 20px;">1</td> </tr> </table>			0	8	--	1	6	4	1
0	8	--	1	6	4	1					
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>S. Ahmed.</u>		TITLE: <u>Paralegal</u>									
SIGNATURE: <u><i>S. Ahmed</i></u>		PHONE: <u>308-9140 #208</u>									
OFFICE: <u>PCT DO/EO</u>											
*****											
THIS SPACE RESERVED FOR FINANCE USE ONLY:											
APPROVED: _____		DATE: _____									

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*